



DLA PIPER US LLP
2000 University Avenue
East Palo Alto, California 94303-2248
O 650.833.2258
F 650.833.2001
W www.dlapiper.com

INFORMAL SUBMISSION

April 11, 2007

To: Primary Examiner Vuthe SIEK Art Unit: 2825	Telephone: (571) 272-1906	Fax Number: (571) 273-1906
U.S. Patent & Trademark Office		

From: Andrew B. Schwaab
Reg. No. 38,611
Tel: 650-833-2258

Attorney-Docket
Number:

352003-991310

Re: U.S. Patent Application No. 10/758,446
Filed: January 14, 2004
First Named Inventor: Yasuyuki NOZUYAMA
Title: CALCULATION SYSTEM OF FAULT COVERAGE AND CALCULATION
METHOD OF THE SAME.

Pages: 16 - (including this form)

Originals: will not follow

If there is a problem with this transmission, please call Maria Kovacs at 650-833-1566

Message: Please note the attached.

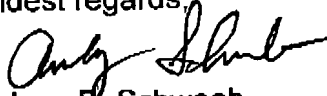
Dear Examiner Siek,

Thank you for our telephone discussions regarding the missing reference. Our files reflect, and I hereby confirm, that the attached reference to Sengupta was mailed to the USPTO in the IDS submitted with the originally-filed application papers on January 14, 2004. The post card stamped by the USPTO indicating receipt of the IDS and its references is also attached hereto. Thus, we enclose:

1. The IDS article "Defect-Based Test: A Key Enabler for Successful Migration to Structural Test" to Sengupta et al.; and
2. Copy of the return post card showing application papers, as filed, stamped by the USPTO mail receiving department.

If you have any questions, please call me at 650-273-3254.

Kindest regards,


Andrew B. Schwaab
Reg. No. 38,611

CONFIDENTIALITY NOTICE

This communication is ONLY for the person named above. Unless otherwise indicated, it contains information that is confidential, privileged or exempt from disclosure under applicable law. If you are not the person named above, or responsible for delivering it to that person, be aware that disclosure, copying, distribution or use of this communication is strictly PROHIBITED. If you have received it in error, or are uncertain as to its proper handling, please immediately notify us by collect telephone and mail the original to us at the above address. Thank you.

Serving clients global
EM7217119.1

MAIL STOP PATENT APPLICATION
Assistant Commissioner for Patents
P.O. Box 1450, Alexandria, VA 22313-1450

Filing Date: January 14, 2004
Serial No.: Not yet assigned
Title: Calculation System Of Fault Coverage And Calculation Method
Of The Same

Enclosed are:

1. Utility Patent Application Transmittal (1 pg);
 2. 49 pages Specification;
 3. 19 sheets of Informal Drawings;
 4. Fee Transmittal for FY 2004 (\$1 pg.);
 5. Check for \$770.00 Check No. 292013;
 6. Declaration and Power of Attorney (3 pgs); UNSIGNED
 7. Information Disclosure Statement, PTO-1449 and cited references;
 8. Request for Priority Under 35 USC 119 and cert copy of Japanese Application No. P2003-008785
 9. Certificate of Mailing
 10. Return Post Card.
- Express Mail No. EV 302279847 US**
Miyoshi 2102487-991310 (EBW/SCP-PA)

22387 U.S. PTO
10/758446



011404



EV 302279847 US

EXPRESS
MAIL

UNITED STATES POSTAL SERVICE®

Customer Copy

Label 11-1 June 2002

0051

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)

P.O. ZIP Code 94301	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date In Mo. 14 Day 04 Year 04	Postage \$ 17.80	Return Receipt Fee \$ 0.00
Time In Mo. 16 Day 31 Year 04	Military <input type="checkbox"/> 12 Noon <input type="checkbox"/> 2 PM	Int'l Alpha-Country Code 001
<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Insured Fee \$ 0.00
Weight 1.00 lbs	Acceptance Clerk Initials S	Total Postage & Fees \$ 17.80
<input type="checkbox"/> No Delivery	<input type="checkbox"/> Holiday	

CUSTOMER USE ONLY

METHOD OF PAYMENT:

Express Mail Company (e-Air, No.)

FROM: (PLEASE PRINT)

PHONE NO.

GRAY CARY WARE FRIEDENRICH

2000 UNIVERSITY AVE

EAST PALO ALTO

CA 94303-2248

Miyoshi

2102487-991310 (21371)

DELIVERY (POSTAL USE ONLY)

Delivery Attempt Mo. 14 Day 04 Year 04	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 16 Day 31 Year 04	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 17 Day 01 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 18 Day 02 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 19 Day 03 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 20 Day 04 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 21 Day 05 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 22 Day 06 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 23 Day 07 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 24 Day 08 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 25 Day 09 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 26 Day 10 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 27 Day 11 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 28 Day 12 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 29 Day 13 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. 30 Day 14 Year 05	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature

Federal Agency Acct. No. or

Postal Service Acct. No.

TO: (PLEASE PRINT)

PHONE NO.

MAIL STOP

COMMISSIONER FOR PATENTS

PO BOX 1450

ALEXANDRIA

VA 22313-1450

PRESS HERE.

You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com

